



# 2011-2013

## Long Term Care Sustainability

### Employment Supports

<b>Category:</b>	Ensuring the Cost-Effectiveness and Fiscal Sustainability of Wisconsin's Long Term Care (LTC) Programs
<b>Focus Area:</b>	Long Term Care – Employment Supports
<b>Projected Savings:</b>	\$500,000 GPR
<b>Proposed Implementation Date:</b>	Spring 2012
<b>Description:</b> Ensure a continuum of employment supports in Family Care, IRIS, PACE and Partnership.	
<b>Main Message Points</b> <ul style="list-style-type: none"><li>▪ The federal waivers that support Family Care and IRIS require active treatment, including participation in employment and employment-related services for waiver participants.</li><li>▪ Recent CMS guidance highlighted the importance of competitive work and the goal to promote integrated, community-based employment options with an emphasis on person-centered planning.</li><li>▪ Approximately 12% of long-term care recipients in Wisconsin participate in competitive-wage, integrated employment and Wisconsin ranks 32<sup>nd</sup> in the percentage of adults with developmental disabilities in Medicaid who are in supported, community-based employment.</li><li>▪ Research has shown that employment results in cost savings, less reliance on public benefits, and more money going back into the local community.</li><li>▪ Community Rehabilitation Programs (CRPs), in addition to workshop-based services, currently provide 65% of community-based employment supports funded by the Division of Vocational Rehabilitation.</li><li>▪ Given recent federal guidance, opportunities also exist to increase community-based employment for people with disabilities that are supported by Medicaid-funded waiver programs.</li></ul>	
<b><i>Proposed Modifications</i></b> <ol style="list-style-type: none"><li><b>1. Division of Vocational Rehabilitation (DVR) Pilot.</b> Establish a statewide pilot program to support community-based employment to leverage 80% federal matching funds and the infrastructure and programming in DVR for integrated employment to prioritize services for people with disabilities in Family Care and IRIS.</li><li><b>2. Infrastructure Grant Funding.</b> As allowed under grant provisions, allocate \$1.6 million of carryover funding from the Medicaid Infrastructure Grant (MIG) to complete activities to:<ul style="list-style-type: none"><li>• Continue to work with CRPs to create more community-based employment supports.</li><li>• Provide assistive technology and supports for youth with disabilities</li><li>• Continue implementation of Project SEARCH, school to work and initiatives to use natural supports</li><li>• Provide assistance for Vocational Futures Planning and MCO network development</li><li>• Finalize guidance on asset development to assist persons to develop sustainable cash assets and saving</li><li>• Provide support to employers to employ persons with disabilities</li><li>• Improve the Disability Employment Data Infrastructure to:<ul style="list-style-type: none"><li>○ Complete data collection activities to identify expenditures and measure employment outcomes</li><li>○ Finalize comprehensive data use agreements between DHS, DVR and DPI</li></ul></li></ul></li></ol>	

3. **Work Incentive Benefits Counseling.** Ensure work incentive benefits counseling service is available and participation encouraged for LTC participants with an integrated employment goal.
  - Ensure availability of Work Incentive Benefits Specialists and Counseling Services as part of ADRC services. Explore opportunities to:
    - Fund up to 10 specialists to serve a regional system corresponding to Family Care districts.
    - Provide mandatory training, initially and ongoing, to economic support workers on the purpose of the Medicaid Purchase Plan and its effective administration.
  - Add Work Incentive Benefits Counseling Services as a specific service for participants in the Medical Assistance Purchase Plan (MAPP).
  - Explore opportunities for Work Incentive Benefits Counseling providers to be credentialed with the state Work Incentive Benefits Specialist Association.
4. **Improve policies for the Medical Assistance Purchase Plan (MAPP).** Analyze possible changes to the MAPP premium formula to support higher participant earning, saving and financial stability:
  - Consider elimination of the current distinction between earned and unearned income in the premium calculation;
  - Establish an effective definition of “employed” for eligibility purposes that is consistent with national policy and ensures that “in-kind” payments for work-like activities for people of working age (under age 65) does not qualify as employment;
  - Provide for participation in MAPP when substantial work ceases at age 65 or later by creating a definition of “employed” specific to this population;
  - Consider implementation of minimum premiums for all participants with countable income above 150% FPL;
  - Define a maximum premium for participants that removes the disincentive toward higher earnings; and
  - Focus outreach on the SSI 1619(b) population to encourage MAPP participation and create provisions for an “individualized threshold” similar to 1619(b) within MAPP.
5. **MCOs and IRIS Consultant Agencies leverage provision of employment services to collect federal reimbursements under the Ticket to Work program.** Encourage and support LTC management organizations (MCOs and ICAs) to register as Employment Networks (ENs) under the Ticket to Work Act:
  - Provide Technical Assistance to LTC agencies in registering for EN status;
  - Include LTC agencies in “Smartworks” pilot in 2012; and
  - Implement service payment strategies transferring SSA reimbursements to providers that generate quicker and higher quality integrated employment outcomes.

**Effect of these changes:**

- Wisconsin will leverage state funding to secure federal vocational rehabilitation funding at an improved match rate in order to support employment for people with disabilities.
- The benefits of key initiatives under MIG funding will conclude and Wisconsin will assure that successful initiatives can be replicated in the long term care system.
- Work incentives counseling will be available to assist and promote employment options for people with disabilities.
- The MAPP plan will be strengthened and key definitions of employment will be clarified.
- MCOs and IRIS Consultant Agencies will support and promote employment of people with disabilities.